2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 13, 2002 8:00 am § Secretary of State DOCUMENT # F99000002337 1. Entity Name BANCO DE CREDITO E INVERSIONES, S.A. 05-13-2002 90261 037 ***150.00 Principal Place of Business Mailing Address 701 BRICKELL AVE., SUITE 1450 701 BRICKELL AVE., SUITE 1450 **MIAMI FL 33131 MIAMI FL 33131** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 52-2166160 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAPABLANCA, FERNANDO A Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE., STE 1450 MIAMI FL 33131 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete Addition CR2E034 (9/01) ☐ Change YARUR, LUIS E NAME NAME 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME COLLADOS, MODESTO NAME STREET ADDRESS 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition OLAVARRIA, LIONEL NAME NAME STREET ADDRESS 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE AGM: ☐ Delete TITLE ☐ Change ☐ Addition OLAVARRIA, LIONEL NAME 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE GM ☐ Delete TITLE ☐ Change ☐ Addition CAPABLANCA, FERNANDO NAME NAME 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33131** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CASANUEVA, JUAN M NAME STREET ADDRESS 701 BRICKELL AVE., SUITE 1450 STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachmen

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SIGNATURE:

MIAMI FL 33131

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